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# AMENDMENT TRANSMITTAL LETTER

Docket No.  
0941-1763PUS1

Application No.  
10/713,022-Conf. #9729

Filing Date  
November 17, 2003

Examiner  
L. Nguyen

Art Unit  
2618

Applicant(s): Szu-Hsien WU

Invention: DUAL BAND TRANSCEIVER ARCHITECTURE FOR WIRELESS COMMUNICATION

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED  |   |   |                                   |          |        |
|--|---|---|-----------------------------------|----------|--------|
|  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate     |        |
| Total Claims   | 1   | - 23 =                                  | 0                                 | x 50.00  | 0.00   |
| Independent<br>Claims  | 27  | - 30 =                                  | 0                                 | x 200.00 | 0.00   |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> |   |   |                                   |          |        |
| Other fee (please specify): Extension for response within first month    |   |   |                                   |          | 120.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:                                 |   |   |                                   |          | 120.00 |

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. 02-2448 in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

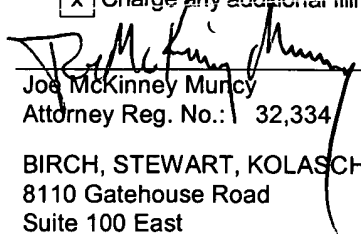
☒ A check in the amount of \$ 120.00 is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 02-2448  
as described below. A duplicate copy of this sheet is enclosed.

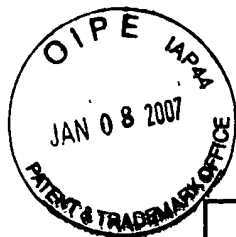
☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

  
Joe McKinney Murcy  
Attorney Reg. No.: 32,334

Dated: January 8, 2007

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PTO/SB/17 (07-06)  
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|   |  |                          |                        |
|---|--|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2006</b> |  | <b>Complete if Known</b> |                        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | 10/713,022-Conf. #9729 |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | Filing Date              | November 17, 2003      |
| <b>(\$)</b> 120.00  |  | First Named Inventor     | Szu-Hsien WU           |
|   |  | Examiner Name            | L. Nguyen              |
|   |  | Art Unit                 | 2618                   |
|   |  | Attorney Docket No.      | 0941-1763PUS1          |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input checked="" type="checkbox"/> Check  | <input type="checkbox"/> Credit Card   |
| <input type="checkbox"/> Money Order   | <input type="checkbox"/> None  |
| <input type="checkbox"/> Other (please identify): _____  |  |
| <input type="checkbox"/> Deposit Account   | Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |  |
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>                     |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments  |

|   |                     |   |                    |                              |                                  |                              |                              |
|---|---------------------|---|--------------------|------------------------------|----------------------------------|------------------------------|------------------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                              |                                  |                              |                              |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                              |                                  |                              |                              |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                              | <b>EXAMINATION FEES</b>          |                              |                              |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>    | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>                  | <b>Small Entity Fee (\$)</b> | <b>Fees Paid (\$)</b>        |
| Utility   | 300                 | 150   | 500                | 250                          | 200                              | 100                          | _____                        |
| Design  | 200                 | 100   | 100                | 50                           | 130                              | 65                           | _____                        |
| Plant   | 200                 | 100   | 300                | 150                          | 160                              | 80                           | _____                        |
| Reissue   | 300                 | 150   | 500                | 250                          | 600                              | 300                          | _____                        |
| Provisional   | 200                 | 100   | 0                  | 0                            | 0                                | 0                            | _____                        |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                              |                                  |                              |                              |
|   |                     |   |                    |                              |                                  | <b>Small Entity Fee (\$)</b> | <b>Small Entity Fee (\$)</b> |
| <b>Fee Description</b>  |                     |   |                    |                              |                                  |                              |                              |
| Each claim over 20 (including Reissues)   |                     |   |                    |                              |                                  | 50                           | 25                           |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                              |                                  | 200                          | 100                          |
| Multiple dependent claims   |                     |   |                    |                              |                                  | 360                          | 180                          |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>         | <b>Multiple Dependent Claims</b> |                              |                              |
| 1 - 23 = 0  |                     | x 50.00   | =                  | 0.00                         | <b>Fee (\$)</b>                  |                              | <b>Fee Paid (\$)</b>         |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                    |                              |                                  |                              |                              |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>         |                                  |                              |                              |
| 27 - 30 = 0   |                     | x 200.00  | =                  | 0.00                         |                                  |                              |                              |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                    |                              |                                  |                              |                              |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                              |                                  |                              |                              |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                              |                                  |                              |                              |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>         |                                  |                              |                              |
| _____ - 100 = _____   | /50                 | (round up to a whole number) x _____                    | =                  | _____                        |                                  |                              |                              |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                              |                                  |                              |                              |
|   |                     |   |                    |                              |                                  | <b>Fees Paid (\$)</b>        |                              |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                              |                                  |                              |                              |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month   |                     |   |                    |                              |                                  | 120.00                       |                              |

|                     |                     |                                   |                 |
|---------------------|---------------------|-----------------------------------|-----------------|
| <b>SUBMITTED BY</b> |                     |                                   |                 |
| Signature           |                     | Registration No. (Attorney/Agent) | 32,334          |
| Name (Print/Type)   | Joe McKinney Murphy | Telephone                         | (703) 205-8026  |
|                     |                     | Date                              | January 8, 2007 |